

Event	Unit # of Units Involved	Event Location	EVENTS - List events for ALL units in the order they occurred										Case No.	Page 3										
			1 Overturn	<div style="display: flex; justify-content: space-between;"> <div> <b>One Veh. Collision With</b>            14 Pedestrian            15 Pedalcycle            16 Railroad Train            17 Domestic Animal            18 Wild Animal            19 Other Object Not Fixed            20 Parked Vehicle on Private Property            21 Impact Attenuator            22 Bridge/Pier/Abutment            23 Bridge Parapet End         </div> <div>           24 Bridge Rail            25 Overpass            26 Guardrail Face            27 Guardrail End            28 Median Barrier            30 Highway Traffic Sign Post            31 Overhead Sign support            32 Street Light Support            33 Utility Pole            39 Other Pole            40 Delineator Post         </div> <div>           41 Culvert            42 Curb            43 Ditch            44 Embankment            45 Fence            46 Mailbox            47 Tree            48 Building Wall            49 Other Fixed Object         </div> </div>																				
			<b>THE EVENT LOCATION</b> 1 On Roadway 2 Left Shoulder 3 Right Shoulder 4 Roadside (Includes Sidewalk) 5 Outside Right of Way 6 Off Roadway - Loc Unknown 7 Median 8 Gore 9 Other A In Parking Lot B Parking Lot Access Road P Private Property																					

UNIT # 1	FIRST EVENT RELATIONSHIP TO JUNCTION										UNIT # 2
	0 Nonjunction 1 In Intersection 2 Intersection Related At Driveway/Alley 4 Driveway/Alley Related On Ramp 6 Ramp Related At Railroad Crossing 8 Railroad Crossing Related Other										
	GENERAL DIRECTION OF TRAVEL (If turning, select direction before turning)										
	General Direction of Street		Unit Direction		General Direction of Street		Unit Direction		FIRST Harmful Event		
	<input type="checkbox"/> South / North		<input type="checkbox"/> North <input type="checkbox"/> South		<input type="checkbox"/> South / North		<input type="checkbox"/> North <input type="checkbox"/> South				
	<input type="checkbox"/> West / East		<input type="checkbox"/> East <input type="checkbox"/> West		<input type="checkbox"/> West / East		<input type="checkbox"/> East <input type="checkbox"/> West		MOST Harmful Event		
	On Street				On Street				Driver / Ped Action		

Sketch the scene

Indicate road names and show all lanes

Show North by Arrow in Circle

Not to Scale

**Driver Actions**

1 Going Straight  
 2 Turning Right  
 3 Right Turn on Red  
 4 Turning Left  
 5 Left Turn on Red  
 6 U-Turn  
 7 Merging  
 8 Changing Lanes  
 10 Passing  
 11 Negotiating Curve  
 12 Stopped in Traffic  
 13 Slowing in Traffic

14 Starting in Traffic  
 15 Parking  
 16 Entering Drivwy./Ally  
 17 Leaving Drivwy./Ally  
 18 Backing  
 20 Avoiding Obstacle  
 21 Avoiding Veh./Ped.  
 22 Pursuing Vehicle  
 23 Fleeing Pursuit  
 24 Racing  
 25 Parked Vehicle in Motion  
 26 Driverless Vehicle in Motion

**Pedestrian/Pedalcycle Actions**

30 Crossing at Painted Intersection  
 31 Crossing at Unpainted Intersection  
 35 Crossing at Non-Intersection X-walk  
 36 Crossing Not at Intersection  
 40 Walk/Ride with Traffic in Bike Lane  
 41 Walk/Ride with Traffic No Bike Lane  
 42 Walk/Ride Facing Traffic in Bike Lane  
 43 Walk/Ride Facing Traffic No Bike Lane  
 50 Standing on Roadway  
 51 Playing on Roadway  
 52 Working on Roadway  
 60 Enter/Leave School Bus  
 70 Not on Roadway  
 99 Other

Property Damage	(Name of Object Struck - Owner Name and Address)	Estimated Damage
		\$

**Narrative / Additional Information / Additional Passengers (indicate unit # and all information for additional passengers)**

WITNESSES Name	Address	State	Home Phone	Work Phone

<input checked="" type="checkbox"/> Investigating Officer's Name and #	Date of Report	Photos Y <input type="checkbox"/> N <input type="checkbox"/>	Approved By	Date
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